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Navywide training, as real as it can get

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By Terrence J. Lerma, emergency preparedness coordinator, Naval Hospital Bremerton, Wash.

Ask anyone in the know and they'll be the first to admit that you can't schedule emergency. If and when an emergency does happen, it will be at the worst possible moment. As such, we have to be ready.

Planning and exercising a realistic after-hours scenario has helped us prepare our personnel for that actual scenario. This training gives them the experience needed ahead of time to be able to handle whatever needs to be done with limited resources and personnel.

After normal working hours, or on any given weekend, there are only duty personnel in areas such as the Operating Room, Emergency Department, Nursing Services, and Clinical Support Services. Holding an after-hours/weekend scenario mass casualty exercise at Naval Hospital Bremerton, Wash., from March 21-24 , served several important purposes.

We stressed the capabilities of the emergency department and main operating room with a patient surge, and assessed the ability of the after-hour staff to respond, triage, treat and/or transport injured patients to appropriate treatment areas.

We provided our staff the opportunity to work with Federal and civilian Fire/Emergency Medical Services to further enhance the working relationship that will be so crucial in a disaster.

We stressed that those on duty had to rise up to deal with an emergency, because in a real-life situation, it could be up to 45 minutes before any backup help is recalled to the command.

This exercise also allowed us to consider the vital importance of timely and accurate communication. Getting the word out to staff to get them to assigned places to handle the emergency was imperative. It was up to the duty section – they had the immediate responsibility of responding as other staff members were still being notified to augment the



Terry Lerma, Naval Hospital Bremerton emergency preparedness coordinator, confers with Hospital Command Center personnel during their mass casualty exercise March 21 to test after-hours response capabilities of limited staff on duty. (Official Navy photo by Douglas H Stutz, NHB Public Affairs)

Navy Medicine Video

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caring for casualties.

There are several ways to quickly recall additional clinical support and every emergency exercise can pose a different scenario. For us in the Pacific Northwest, the threat of an earthquake is real and could impact our network connectivity. We would then have to use other means of communication such as social media.

This type of training is very valuable especially for the emergency medical technicians and firefighters. They were the ones who went through and practiced their training. We don't normally see these kinds of cases on a day-to-day basis so being able to do this type of drill with limited resources makes you more aware of your capabilities and shortcomings.



BREMERTON, Wash. (Mar. 21, 2012) –Naval Hospital Bremerton (NHB) Sailors transport Naval Branch Health Clinic Puget Sound Naval Shipyard Hospital Corpsman Andrew Colbeck by stretcher into the NHB emergency room during a mass casualty drill. (U.S. Navy photo by Mass Communication Specialist 1st Class (SW) Charlemagne Obana).

Editor’s Note:

The exercise, held at [Naval Hospital Bremerton](#) in conjunction with the Navywide force protection exercise Solid Curtain/Citadel Shield (SCCS). SCCS 2012 was conducted at naval installations all over the country to assess and enhance the Navy’s ability to respond to different threats.

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For the news story about this training event click [here](#).

For more information on Naval Hospital Bremerton check out their Facebook page by clicking [here](#).

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